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PTO/SB/17(11-00)

Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL FOR FY 2001

TOTAL AMOUNT OF PAYMENT (\$) 466.00

Complete if Known:

Application No. 09/759,002

Filing Date January 11, 2001

First Named Inventor Mark Peairs, et al.

Group Art Unit Not yet assigned

Examiner Name Not yet assigned

Attorney Docket No. 74451.P084XC

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METHOD OF PAYMENT (check one)

The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 02-2666

Deposit Account Name _____

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

Payment Enclosed: Check
 Credit Card
 Money Order
 Other

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FEE CALCULATION

1. BASIC FILING FEE

<u>Large Entity</u>	<u>Small Entity</u>	<u>Fee Description</u>	<u>Fee Paid</u>
Fee	Fee	Fee	
Code	(\$)	Code	(\$)
101	710	201	355
106	320	206	160
107	490	207	245
108	710	208	355
114	150	214	75
		Utility application filing fee	
		Design application filing fee	
		Plant filing fee	
		Reissue filing fee	
		Provisional application filing fee	

SUBTOTAL (1) \$ N/A

2. EXTRA CLAIM FEES

	<u>Extra Claims</u>	<u>Fee from below</u>	<u>Fee Paid</u>
Total Claims <u>37</u>	<u>- 20** = 17</u>	<u>X 18.00</u>	<u>= 306.00</u>
Independent Claims <u>5</u>	<u>- 3** = 2</u>	<u>X 80.00</u>	<u>= 160.00</u>
Multiple Dependent			

**Or number previously paid, if greater; For Reissues, see below.

Large Entity Small Entity

<u>Fee</u>	<u>Fee</u>	<u>Fee</u>	<u>Fee</u>	<u>Fee Description</u>
Code	(\$)	Code	(\$)	
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$ 466.00

FEE CALCULATION (continued)

3. ADDITIONAL FEES

<u>Large Entity</u>	<u>Small Entity</u>	<u>Fee Description</u>	<u>Fee Paid</u>
Fee Code	Fee (\$)	Fee Code (\$)	
105	130	205	Surcharge - late filing fee or oath
127	50	227	Surcharge - late provisional filing fee or cover sheet
139	130	139	Non-English specification
147	2,520	147	For filing a request for ex parte reexamination
112	920*	112	Requesting publication of SIR prior to Examiner action
113	1,840*	113	Requesting publication of SIR after Examiner action
115	110	215	Extension for reply within first month
116	390	216	Extension for reply within second month
117	890	217	Extension for reply within third month
118	1,390	218	Extension for reply within fourth month
128	1,890	228	Extension for reply within fifth month
119	310	219	Notice of Appeal
120	310	220	Filing a brief in support of an appeal
121	270	221	Request for oral hearing
138	1,510	138	Petition to institute a public use proceeding
140	110	240	Petition to revive – unavoidable
141	1,240	241	Petition to revive - unintentional
142	1,240	242	Utility issue fee (or reissue)
143	440	243	Design issue fee
144	600	244	Plant issue fee
122	130	122	Petitions to the Commissioner
123	50	123	Processing fee under 37 CFR 1.17(q)
126	180	126	Submission of Information Disclosure Stmt
581	40	581	Recording each patent assignment per property (times number of properties)
146	710	246	For filing a submission after final rejection (see 37 CFR 1.129(a))
149	710	249	For each additional invention to be examined (see 37 CFR 1.129(b))
179	710	279	Request for Continued Examination (RCE)
169	900	169	Request for expedited examination of a design application
195	300	195	Publication fee for early, voluntary, or normal publication
196	300	196	Publication fee for republication
194	130	194	Request for voluntary publication or republication
098	130	098	Processing fee under 37 CFR 1.17(i)
091	1,240	091	Acceptance of unintentionally delayed claim for priority

Other fee (specify) _____

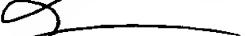
Other fee (specify) _____

SUBTOTAL (3) \$ 0

*Reduced by Basic Filing Fee Paid

SUBMITTED BY:

Typed or Printed Name: Michael J. Mallie

Signature:  Date: June 19, 2001

Reg. Number: 36,591 Telephone Number: 408-720-8300

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FIRST CLASS CERTIFICATE OF MAILING

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on _____

(6/19/01)

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Mara E. Brown

Name of Person Mailing Correspondence

Mara E. Brown

Signature

(6/19/01)

Date

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Serial/Patent No.: 09/759,002 Filing/Issue Date: 01/11/01

Client: Ricoh Corporation

Title: AUTOMATIC DOCUMENT ARCHIVING FOR A COMPUTER SYSTEM

BSTZ File No.: 074451.P084XC Atty/Secty Initials: MJM/mzb

Date Mailed: 06/19/01 Docket Due Date: ***

The following has been received in the U.S. Patent & Trademark Office on the date stamped hereon:

- | | | |
|---|--|--|
| <input type="checkbox"/> Amendment/Response (____ pgs.) | <input type="checkbox"/> Express Mail No: _____ | <input checked="" type="checkbox"/> Check No. <u>43579</u> |
| <input type="checkbox"/> Appeal Brief (____ pgs.) (in triplicate) | <input type="checkbox"/> _____ Month(s) Extension of Time | <input type="checkbox"/> Amt: <u>\$466.00</u> |
| <input type="checkbox"/> Application - Utility (____ pgs., with cover and abstract) | <input type="checkbox"/> Information Disclosure Statement & PTO-144 (____ pgs.) | <input type="checkbox"/> Check No. _____ |
| <input type="checkbox"/> Application - Rule 1.53(b) Continuation (____ pgs.) | <input type="checkbox"/> Issue Fee Transmittal | <input type="checkbox"/> Amt: _____ |
| <input type="checkbox"/> Application - Rule 1.53(b) Divisional (____ pgs.) | <input type="checkbox"/> Notice of Appeal | |
| <input type="checkbox"/> Application - Rule 1.53(b) CIP (____ pgs.) | <input type="checkbox"/> Petition for Extension of Time | |
| <input type="checkbox"/> Application - Rule 1.53(d) CPA Transmittal (____ pgs.) | <input type="checkbox"/> Petition for _____ | |
| <input type="checkbox"/> Application - Design (____ pgs.) | <input type="checkbox"/> Postcard | |
| <input type="checkbox"/> Application - PCT (____ pgs.) | <input type="checkbox"/> Power of Attorney (____ pgs.) | |
| <input type="checkbox"/> Application - Provisional (____ pgs.) | <input checked="" type="checkbox"/> Preliminary Amendment (____ pgs.) <u>13</u> | |
| <input type="checkbox"/> Assignment and Cover Sheet | <input type="checkbox"/> Reply Brief (____ pgs.) | |
| <input checked="" type="checkbox"/> Certificate of Mailing | <input type="checkbox"/> Response to Notice of Missing Parts | |
| <input type="checkbox"/> Declaration & POA (____ pgs.) | <input type="checkbox"/> Small Entity Declaration for Indep. Inventor/Small Business | |
| <input type="checkbox"/> Disclosure Docs & Qig & Copy of Inventor's Signed Letter (____ pgs.) | <input checked="" type="checkbox"/> Transmittal Letter, <u>Telephone</u> | |
| <input type="checkbox"/> Drawings: ____ # of sheets includes ____ figures | <input checked="" type="checkbox"/> Fee Transmittal, in duplicate | |
| <input type="checkbox"/> Other: _____ | | |
| | | |
| | | |

Attorney's Docket No.: 74451.P084XC

Patent

In re the Application of: Mark Pears, et al.

(inventor(s))

Application No.: 09/759,002Filed: January 11, 2001For: AUTOMATIC DOCUMENT ARCHIVING FOR A COMPUTER SYSTEM

(title)

ASSISTANT COMMISSIONER FOR PATENTS

Washington, D.C. 20231

SIR: Transmitted herewith is a Preliminary Amendment for the above application.

- Small entity status of this application under 37 C.F.R. §§ 1.9 and 1.27 has been established by a verified statement previously submitted.
- A verified statement to establish small entity status under 37 C.F.R. §§ 1.9 and 1.27 is enclosed.
- No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)	(Col. 2)	(Col. 3)	
	Claims Remaining After Amd.	Highest No. Previously Paid For	Present Extra	
Total Claims	* 37	Minus	**20	17
Indep. Claims	* 5	Minus	***3	2

First Presentation of Multiple Dependent Claim(s)

SMALL ENTITY	
Rate	Additional Fee
X9	\$
X40	\$
+135	\$
Total Add. Fee	\$

OTHER THAN A SMALL ENTITY	
Rate	Additional Fee
X18	\$306.00
X80	\$160.00
+270	\$
Total Add. Fee	\$466.00

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

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on June 19, 2001

Date of Deposit

Mara E. Brown

Name of Person Mailing Correspondence

Signature

6/19/01

Date

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A check in the amount of \$ 466.00 is attached for presentation of additional claim(s).
 Applicant(s) hereby Petition(s) for an Extension of Time of _____ month(s) pursuant to
37 C.F.R. § 1.136(a).

A check for \$ _____ is attached for processing fees under 37 C.F.R. § 1.17.
 Please charge my Deposit Account No. 02-2666 the amount of \$ _____.

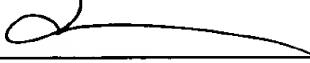
The Commissioner of Patents and Trademarks is hereby authorized to charge payment of the
following fees associated with this communication or credit any overpayment to Deposit Account
No. 02-2666:

- Any additional filing fees required under 37 C.F.R. § 1.16 for presentation of
extra claims.
 Any extension or petition fees under 37 C.F.R. § 1.17.

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

Date: June 19, 2001

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Seventh Floor
Los Angeles, California 90025
(408) 720-8300


Michael J. Mallie

Reg. No. 36,591